

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LW	68904	2/22/00
O.I.P.E. CLASSIFIER		112	3/3/00
FORMALITY REVIEW	EVB	66793	02/21/00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	2/18/2002
2	✓	✓	2/18/2002
3	✓	✓	2/18/2002
4	✓	✓	2/18/2002
5	✓	✓	2/18/2002
6	✓	✓	2/18/2002
7	✓	✓	2/18/2002
8	✓	✓	2/18/2002
9	✓	✓	2/18/2002
10	✓	✓	2/18/2002
11	✓	✓	2/18/2002
12	✓	✓	2/18/2002
13	✓	✓	2/18/2002
14	✓	✓	2/18/2002
15	✓	✓	2/18/2002
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17	✓	✓	2/18/2002
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46	✓	✓	2/18/2002
47	✓	✓	2/18/2002
48	✓	✓	2/18/2002
49	✓	✓	2/18/2002
50	✓	✓	2/18/2002

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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